

EXHIBIT 2

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
SOUTHERN DIVISION

ASD SPECIALTY HEALTHCARE, INC. d/b/a
ONCOLOGY SUPPLY COMPANY
2801 Horace Shepard Drive
Dothan, Alabama 36303,

Plaintiff,

v.

ROBERT G. HICKES, M.D.
1301 Trumansburg Road
Suite Q
Ithaca, NY 14850,

Defendant.

CIVIL ACTION

NO.: 1:05cv592 - T

**PLAINTIFF'S FIRST SET OF REQUESTS FOR ADMISSIONS ADDRESSED TO
DEFENDANT ROBERT G. HICKES, M.D.**

TO: ROBERT G. HICKES, M.D.
C/o Ellis Brazeal, III, Esquire
Walston, Wells, Anderson & Birchall LLP
1819 5th Avenue North, Suite 1100
Birmingham, Alabama 35203

Pursuant to Rule 36 of the Federal Rules of Civil Procedure, the Plaintiff, by and through its undersigned attorneys, directs the following requests for admissions to the Defendant Robert G. Hickes, M.D. ("Hickes"). Pursuant to the Federal Rules of Civil Procedure, you are hereby notified to provide written answers under oath to the following Requests. Your answers must be filed within thirty (30) days after the service of these Requests upon you. Failure to file answers will result in each Request being admitted. Your answers shall admit or deny the matter or set forth in detail reasons why you cannot truthfully do so. A denial shall fairly meet the substance of the requested admission. If you must qualify an answer or deny only part of the matter of



which an admission is requested, you shall specify so much of it as is true and qualify or deny the remainder. You may not give lack of information or knowledge as a reason for failure to admit or deny unless it is stated that reasonable inquiry has been made and that the information known to you or readily obtainable by you is not sufficient to enable you to admit or deny.

I. DEFINITIONS

As used in these Requests, the following terms shall have the meaning set forth below:

A. "Plaintiff" means the plaintiff, ASD Specialty Healthcare Inc. d/b/a Oncology Supply Company, and its predecessors-in-interest, and any officers, partners, agents, representatives and/or employees of any of them.

B. "Hickes" means Robert G. Hickes, M.D., and his agents, representatives and/or employees.

C. "You" or "your" means Hickes.

D. "Defendant" shall mean Hickes.

E. "The Action" shall mean the above-captioned action in which a complaint was filed against the Defendant.

F. "The Complaint" shall mean the Complaint, at the above-captioned docket number.

G. "The Answer" shall mean the answer to the Complaint, filed by the Defendant on or about August 26, 2005.

H. "The Interrogatories" shall mean the Plaintiff's First Set of Interrogatories addressed to the Defendant.

I. "The Admissions" shall mean the Plaintiff's First Set of Requests for Admissions Directed to the Defendant.

J. "Person" means any natural individual or any corporation, firm, partnership, proprietorship, association, joint venture, governmental entity or any business organization or any other entity.

K. "Document" means any kind of written or graphic material, however produced or reproduced, of any kind or description, whether sent or received or neither, which is in your possession, custody and/or control, including originals, non-identical copies, and drafts and both written sides of such material, including but not limited to any and all written, filmed, graphic and audio or visually recorded matter of every kind and description however produced or reproduced, whether draft or final, original or reproduction, whether performed or reproduced or on paper, cards, tapes, film, electronic facsimile, electronic mail, computer storage devices, or any other media, including but not limited to, papers, books, letters, writings, magazines, advertisements, periodicals, bulletins, circulars, pamphlets, statements, notices, reports, rules, regulations, directives, teletype messages, photographs, objects, tangible things, correspondence, telegrams, cables, telex messages, interoffice communications, interoffice communications, memoranda, notes, notations, records, work papers, transcripts, minutes, reports and recordings of telephone or other conversations, or of interviews, conferences, meetings, affidavits, statements, CD ROM, floppy or hard disks, charts, graphs, specifications, drawings, blueprints, summaries, opinions, proposals, reports, studies, analyses, audits, evaluations, contracts, agreements, covenants, understandings, permits, licenses, journals, statistical records, ledgers, books of account, bookkeeping entries, financial statements, tax returns, vouchers, checks, check stubs, invoices, receipts, desk calendars, appointment books, diaries, lists, tabulations, summaries, time sheets, logs, sound output, microfilms, microfiches, all records kept by electronic, photographic or mechanical means, tapes, computer tapes, tape recordings, computer

printouts, input-output computer systems and all other informal or formal writing or tangible things on which any handwriting, typing, printing, sound signal impulse or symbol is recorded or reproduced and any and all amendments or supplements to any of the foregoing whether prepared by you or any other person, and all things similar to any of the foregoing documents. If a document is referred to, the reference shall include, but shall not be limited to, the original and each and every copy and draft thereof differing in any way from the original, if an original exists, or each and every copy and draft if no original exists.

L. "Concerning" means relating to, referring to, describing, evidencing, regarding or constituting.

M. "Communication(s)" means any manner of transmitting or receiving information, opinions or thoughts, whether orally, in writing or otherwise.

N. "All documents" means any and all documents as defined above that are known to you or that can be located or discovered by your reasonably diligent efforts. -

II. RULES OF CONSTRUCTION

A. "All" and "each" shall be construed as both all and each.

B. The connective "and" and "or" shall be construed either disjunctively or conjunctively as necessary to bring within the scope of the discovery requests all responses that otherwise might be construed to be outside of its scope.

C. The singular includes the plural and vice versa.

III. INSTRUCTIONS

- a. Answer each Request separately and fully unless you object to it, in which case you should specifically state the reason for your objection.
- b. To the extent you object in part to any Request, answer that part of the request in question to which no objection is asserted.
- c. In answering these Requests, you should furnish all information available to you at the time of answering.
- d. Unless otherwise stated, the relevant time period (the "Relevant Period") covering each Request is from January 1, 2003, to the current time.
- e. Where precise or exact information, data or dates are not available or known, state approximate information data or dates and state that you have done so.
- f. When identifying an individual, state his or her full name; current or last known address; current or last known employer; title or job designation; and an employer and title or job designation at the time of the events referred to in the interrogatory or your answer to it.
- g. In addition, state the person whom the individual was representing or for whom the individual was acting, if any.
- h. When identifying a business organization or governmental entity, state its name and address and the name and address of each of its agents who acted for it with respect to the matters relating to the Request in question and your relationship with it.
- i. Whenever you answer a Request on information and/or belief, state the source of your information and/or the basis for your belief.
- j. In each instance where you deny knowledge and/or information sufficient to answer any part of a Request, state the name and address of each person, if any, known or believed to have such knowledge and/or information.

REQUEST FOR ADMISSION NO. 1

Admit that, beginning in 2004, Hickes ordered and received from Plaintiff medical, pharmaceutical and other products on an ongoing basis.

REQUEST FOR ADMISSION NO. 2

Admit that, as of March 31, 2005, the total principal balance due to Plaintiff from Hickes for goods shipped to or for the benefit of Hickes was in excess of \$177,253.77.

REQUEST FOR ADMISSION NO. 3

Admit that the invoices attached hereto as Exhibit "A" are true and correct copies of invoices received by you.

REQUEST FOR ADMISSION NO. 4

Admit that the items listed on the invoices attached hereto as Exhibit "A" were received by you from the Plaintiff.

REQUEST FOR ADMISSION NO. 5

Admit that you have never objected to the amounts set forth in any of Plaintiff's invoices attached hereto as Exhibit "A."

REQUEST FOR ADMISSION NO. 6

Admit that the invoices attached hereto as Exhibit "A" reflect the amounts you owe to the Plaintiff.

REQUEST FOR ADMISSION NO. 7

Admit that you have not paid any of the amounts shown on the invoices attached hereto as Exhibit "A."

REQUEST FOR ADMISSION NO. 8

Admit that, as of March 31, 2005, Hickes could not pay his bills as and when they came due.

REQUEST FOR ADMISSION NO. 9

Admit that Plaintiff invoiced Hickes for medical and pharmaceutical supplies.

REQUEST FOR ADMISSION NO. 10

Admit that you know of no facts that would constitute a waiver by Plaintiff of its right to bring the Action against you.

REQUEST FOR ADMISSION NO. 11

Admit that you know of no facts that would estop Plaintiff from bringing the Action against you.

REQUEST FOR ADMISSION NO. 12

Admit that there is no course of performance or course of dealings between Plaintiff and Hickes that would constitute a modification or waiver of the payment obligations alleged in the Complaint.

REQUESTS FOR ADMISSION NO. 13

Admit that you know of no facts that would constitute lack of consideration on the part of Plaintiff in its dealings with Hickes.

REQUEST FOR ADMISSION NO. 14

Admit that you know of no facts that support your claim that there is a lack of personal jurisdiction over you.

REQUEST FOR ADMISSION NO. 15

Admit that when you ordered products from Plaintiff, you knew that you could not pay for these products.

REQUEST FOR ADMISSION NO. 16

Admit that you are a citizen of New York with an address of 1301 Trumansburg Road, Suite Q, Ithaca, New York 14850.

REQUEST FOR ADMISSION NO. 17

Admit that you communicated with and solicited business with the Plaintiff.

REQUEST FOR ADMISSION NO. 18

Admit that you negotiated with the Plaintiff.

REQUEST FOR ADMISSION NO. 19

Admit that you requested that the Plaintiff ship products to you.

REQUEST FOR ADMISSION NO. 20

Admit that you submitted documents to the Plaintiff.

REQUEST FOR ADMISSION NO. 21

Admit that you contracted with the Plaintiff.

REQUEST FOR ADMISSION NO. 22

Admit that you requested Plaintiff to sell and deliver pharmaceutical and other products to you on open account.

REQUEST FOR ADMISSION NO. 23

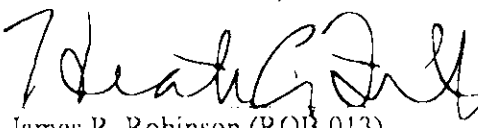
Admit that you failed and refused and continue to fail and refuse to make payment to Plaintiff in accordance with your obligations despite the fact that Plaintiff sent the invoices attached hereto as Exhibit "A" to you and demanded payment from you.

REQUEST FOR ADMISSION NO. 24

Admit that you breached the terms of the agreement between you and the Plaintiff.

REQUEST FOR ADMISSION NO. 25

Admit that the summary attached hereto as Exhibit "B" accurately reflects the outstanding principal balance owed by you to the Plaintiff.

BURR & FOREMAN, LLP
By: 
James R. Robinson (ROB 013)
Heath A Fite (FIT 011)

Attorneys for Plaintiff

OF COUNSEL:
BURR & FORMAN LLP
3100 SouthTrust Tower
420 North 20th Street
Birmingham, Alabama 35203
Telephone: 205-251-3000
Facsimile: 205-458-5100

CERTIFICATE OF SERVICE

I hereby certify that on the 18th day of October, 2005, I caused a true and correct copy of Plaintiff's First Set Of Requests For Admissions Addressed To Robert G. Hickes, M.D. to be served on the following by hand delivery:

Ellis Brazeal, III, Esquire
Walston, Wells, Anderson & Birchall LLP
1819 5th Avenue North, Suite 1100
Birmingham, Alabama 35203


Of Counsel

EXHIBIT "A"



P O Box 2001
Dorham, AL 36302
888-877-8430 (Phone)
334-984-2448 (Fax)
FEIN: 33-0800482

2022-1866

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO 13010827692

01-04-2005

1 of 2

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1866*1F31ESA00000216

| ORDER # | DATE | ACCOUNT NUMBER | POB / CUSTOMER | SALES REPRESENTATIVE | CUSTOMER PHONE |
|-----------|------------|----------------------------|----------------------------|----------------------|---------------------------|
| 320603986 | 01-04-2005 | A 000030075 B 000030075 | C 000030075 D 000030075 | OSC 030 | DOT077 DOT020 |
| | | | | | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | UNIT | ITEM NUMBER | DESCRIPTION | UNIT PRICE | QTY | EXTENDED PRICE |
|------------------|------------------|------|-------------|---|------------|------------|----------------|
| 18 | 18 | 0 | 11620 | RX ANZEMET 100MG PF SDV 5ML NDC # -- 00008-1208-32 | 40 21 | FA TAX: | 723 78 0 00 |
| 1 | 1 | 0 | 12832 | MS BD NEEDLE 21G 1" 5165 100/BX NDC # -- 08290-3051-65 | 5 31 | BX TAX: | 5 31 0 00 |
| 1 | 1 | 0 | 11548 | RX CISPLATIN P/F 50MG MDV 50ML NDC # -- 63323-0103-61 | 10 21 | EA TAX: | 10 21 0 00 |
| | 3 | 0 | 24941 | RX FLODARABINE 50MG/2ML SOL NDC # -- 00703-4852-11 | 264 54 | EA TAX: | 793 62 0 00 |
| 1 | 1 | 0 | 25473 | RX PACITAXEL IN J 100MG MDV NDC # -- 55300-0114-20 | 56 30 | EA TAX: | 56 30 0 00 |
| 1 | 1 | 0 | 10510 | RX PROCIT 10M UN/ML VL 6X1ML NDC # -- 58676-0310-01 | 608 43 | pk TAX: | 608 43 0 00 |

Comments:

AMOUNT DUE

11,550.01

* A Division of AmersourceBergen Specialty Group

PLEASE RETURN THIS STUB WITH REMITTANCE, THANK YOU

1F31FLM1:1 2

If postmarked by 01-19-2005 Pay \$ 11319.01
If postmarked by 02-18-2005 Pay \$ 11434.51
If postmarked by 03-20-2005 Pay \$ 11550.01
If postmarked after 03-20-2005 Pay \$ 11665.51
Terms : 2% 15, 1% 45, Net 75 Days

There will be an additional 1% charge per 30 days after the due date

| | |
|-----------------|--------------|
| CUSTOMER NUMBER | 000030075 |
| INVOICE NUMBER | 13010827692 |
| INVOICE DATE | 01-04-2005 |
| AMOUNT DUE | \$ 11,550.01 |
| DUE DATE | 03-20-2005 |



Please indicate payment amount and
check number in the boxes provided

| | |
|--------------|----|
| CHECK NUMBER | |
| AMOUNT PAID | \$ |

Please
Remit
To:

ONCOSUPPLY
PO BOX 676554
DALLAS, TX 75267-8554

00003007513010827692000001155001000000032020050

2022-1868

INVOICE

INVOICE NO 13010827692

01-04-2005

2 of 2

ALPHA A

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1858*1E81ESA00000210

| GROUP | DATE | ACCOUNT NUMBER | LOB | BUSINESS TYPE | SALES PERSON | DEPT | CUSTOMER PRIORITY |
|------------|------|----------------|-------------|---------------|--------------|--------|---------------------------|
| 320803886 | | A 000030075 | C 000030075 | OSC | DOT077 | DOT020 | |
| 01-04-2005 | | B 000030075 | D 000030075 | 030 | | | 2% 15, 1% 45, Nel 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | QTY. IN STOCK | ITEM NUMBER | CLASS | DESCRIPTION | UNIT PRICE | TAX | EXTENDED PRICE |
|------------------|------------------|---------------|-------------|-------|---|------------|------------|-----------------|
| 1 | 1 | 0 | 11320 | RX | PROCRT 20MUN/ML MDV 6X1ML NDC # -- 58676-0320-01 | 1216 86 | pk TAX: | 1216 86 0 00 |
| 2 | 2 | 0 | 10982 | RX | PROCRT 40M UN/ML VL 4X1ML NDC # -- 59876-0340-01 | 1622 48 | pk TAX: | 1244 96 0 00 |
| | 1 | 0 | 12254 | RX | SOD CHL 0.8% PF 25X50ML NDC # -- 00074-4888-50 | 18 69 | pk TAX: | 18 69 0 00 |
| 5 | 5 | 0 | 11381 | RX | TAXOTERE 20MG/5ML SDV 0.5ML NDC # -- 00075-8001-20 | 282 22 | EA TAX: | 1411 10 0 00 |
| 1 | 1 | 0 | 11380 | RX | TAXOTERE 40MG/ML (80MG) SDV 2ML NDC # -- 00075-8001-80 | 1128 86 | EA TAX: | 1128 86 0 00 |
| 3 | 3 | 0 | 23328 | RX | ZOMETA INJ 4MG/5ML VIAL NDC # -- 00078-0387-25 | 177 23 | EA TAX: | 2331 69 0 00 |

11,550 02

0 00

AMOUNT DUE

11,550,01

ADDITIONAL INFORMATION:



P.O. Box 2001
Dothan, AL 36302
888-877-8430 (Phone)
334-984-2448 (Fax)
FEIN: 33-0800482

2022-1866

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO. 13010833374

| | | |
|------------|--------|-------|
| 01-10-2005 | 1 of 1 | ALPHA |
|------------|--------|-------|

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1866*1F91EWAOK000182

| ORDER DATE | ACCOUNT NUMBER | ORDER TYPE | CUSTOMER | SALES PERSON | DEPT | CUSTOMER ID | TERMS |
|------------|----------------|-------------|----------|--------------|--------|-------------|---------------------------|
| 320807618 | A 000030075 | C 000030075 | OSC | DOT080 | DOT020 | | |
| 01-10-2005 | B 000030075 | D 000030075 | 030 | | | | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | UNIT PRICE | EXTENDED PRICE | DESCRIPTION | UNIT PRICE | TAX | EXTENDED PRICE |
|------------------|------------------|------------|----------------|---|------------|-----|----------------|
| 2 | 2 | 0 | 12884 | RX ADRIAMYCIN 50MG USP SDV 25ML NDC # -- 55390-0237-01 | 37 11 | EA | 74 22 |
| 1 | 1 | 0 | 21618 | RX NEULASTA 6MG/0.6ML SYR NDC # -- 55513-0190-01 | 2188 03 | EA | 2188 03 |
| 2 | 2 | 0 | 24548 | RX PACITAXEL INJ 100MG/16 7ML NDC # -- 61703-0342-22 | 56 38 | EA | 112 76 |
| 1 | 1 | 0 | 22162 | RX PAMIDRONATE LIQ 9MG/ML SDV10ML NDC # -- 63323-0735-10 | 170 10 | EA | 170 10 |
| 3 | 3 | 0 | 10982 | RX PROCIT 40M UN/ML VL 4X1ML NDC # -- 59676-0340-01 | 1622 48 | pk | 4867 44 |
| 6 | 6 | 0 | 11301 | RX TAXOTERE 20MG/5ML SDV 0 5ML NDC # -- 00075-8001-20 | 282 22 | EA | 1693 32 |

Comments:

SUBTOTAL

9,305.87

TOTAL

0.00

AMOUNT DUE**9,305.87**

* A Division of AmerisourceBergen Specialty Group

PLEASE RETURN THIS STUB WITH REMITTANCE, THANK YOU

1F91F1A1N:1 1

If postmarked by 01-25-2005 Pay \$ 9119.76
If postmarked by 02-24-2005 Pay \$ 9212.82
If postmarked by 03-26-2005 Pay \$ 9305.87
If postmarked after 03-26-2005 Pay \$ 9398.92
Terms : 2% 15, 1% 45, Net 75 Days

There will be an additional 1% charge per 30 days after the due date



Please indicate payment amount and
check number in the boxes provided

| | |
|--------------|----|
| CHECK NUMBER | |
| AMOUNT PAID | \$ |

Please
Remit
To:

ONCOLOGY SUPPLY
PO BOX 676554
DALLAS, TX 75267-6554

00003007513010833374000000930587000000032620056



P.O. Box 2001
Dothan, AL 36302
888-877-8430 (Phone)
334-984-2448 (Fax)
FEIN: 33-0800482

2022-1866

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO. 13010841697

01-18-2005

1 of 2

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1866*1FH1EJRDZ000200

| ORDER DATE | ACCT NUMBER | ORDER NUMBER | ORDER TYPE | SALES PERSON | DEPT | CUSTOMER PO | TERMS |
|------------|-------------|--------------|------------|--------------|--------|-------------|---------------------------|
| 320612613 | A 000030075 | C 000030075 | OSC | DOT095 | DOT020 | | |
| 01-18-2005 | B 000030075 | D 000030075 | 030 | | | | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | UNIT PRICE | ITEM NUMBER | CLASS | DESCRIPTION | UNIT PRICE | EXTENDED PRICE |
|------------------|------------------|------------|-------------|-------|--|------------|----------------|
| 1 | 1 | 0 | 11153 | RX | DIPHENHYDRAMINE 50MG VL 25X1ML NDC # -- 00841-0376-25 | 20 10 | 20 10 |
| 2 | 2 | 0 | 21610 | RX | NEULASTA 6MG/0.6ML SYR NDC # -- 55513-0180-01 | 2380 03 | 4776 06 |
| 1 | 1 | 0 | 11303 | RX | NEUPOGEN 300MCG VL 10X1 ML NDC # -- 55513-0530-10 | 1706 33 | 1706 33 |
| | 1 | 0 | 10987 | RX | PROCRIT 40M UN/ML VL 4X1ML NDC # -- 59676-0340-01 | 1622 48 | 1622 48 |
| 6 | 6 | 0 | 11381 | RX | TAXOTERE 20MG/5ML SDV 0.5ML NDC # -- 00075-8001-20 | 282 22 | 1691 32 |
| 2 | 2 | 0 | 11380 | RX | TAXOTERE 40MG/ML(80MG) SDV 2ML NDC # -- 00075-8001-80 | 1128 86 | 2257 72 |

Comments:

AMOUNT DUE

14,407.70

* A Division of AmerisourceBergen Specialty Group

PLEASE RETURN THIS STUB WITH REMITTANCE, THANK YOU

1FH1EPBFQ12

If postmarked by 02-02-2005 Pay \$ 14119.55
If postmarked by 03-04-2005 Pay \$ 14263.63
If postmarked by 04-03-2005 Pay \$ 14407.70
If postmarked after 04-03-2005 Pay \$ 14551.77
Terms : 2% 15, 1% 45, Net 75 Days

There will be an additional 1% charge per 30 days after the due date



Please indicate payment amount and
check number in the boxes provided

| | |
|--------------|----|
| CHECK NUMBER | |
| AMOUNT PAID | \$ |

Please
Remit
To:

ONCOLOGY SUPPLY
PO BOX 676554
DALLAS, TX 75267-6554

00003007513010841697000001440770000000040320051



P.O. Box 2001
Dothan, AL 36302
888-877-8430 (Phone)
334-984-2448 (Fax)
FEIN: 33-0800482

2022-1866

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO 13010841697

01-18-2005

2 of 2

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1866*1F11EJRBZ000208

| ORDER DATE | ACCOUNT NUMBER | CODE | CUSTOMER | DATE | DEPT | CUSTOMER PO | TERMS |
|------------|----------------|-------------|----------|--------|--------|-------------|---------------------------|
| 320612613 | A 000030075 | C 000030075 | OSC | DOT095 | DOT020 | | |
| 01-18-2005 | B 000030075 | D 000030075 | 030 | | | | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | QTY B/O | ITEM NUMBER | CLASS | DESCRIPTION | UNIT PRICE | EA | EXTENDED PRICE |
|------------------|------------------|---------|-------------|-------|---|------------|------|----------------|
| 3 | 3 | 0 | 23328 | RX | ZOMETA INJ 4MG/5ML VIAL NDC # -- 00078-0387-25 | 777.23 | | 2331.69 |
| | | | | | | | TAX: | 0.00 |

SUBTOTAL

14,407.70

TOTAL

0.00

AMOUNT DUE

14,407.70



P.O. Box 2001
Dothan, AL 36302
888-877-8430 (Phone)
334-984-2440 (Fax)
FERN: 33-0803482

2022-1066

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO 13010847488

01-24-2005

1 of 2

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1066*1FN1E07BN000224

| ORDER DATE | ACCOUNT NUMBER | FOR CUSTOMER | SALES PERSON / DEPT | CUSTOMER ID / TERMS |
|------------|----------------|--------------|---------------------|---------------------------|
| 320618082 | A 000030075 | C 000030075 | OSC DOT096 DOT020 | |
| 01-24-2005 | B 000030075 | D 000030075 | 030 | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | QTY B/C | ITEM NUMBER | DESCRIPTION | UNIT PRICE | U/M | EXTENDED PRICE |
|------------------|------------------|---------|-------------|--|------------|-----|----------------|
| 1 | 1 | 0 | 22004 | RX FASLODEX 250MG PF 5YR 1X5ML NDC # -- 00310-0720-50 | 816.97 | pk | 816.97 |
| 2 | 2 | 0 | 24941 | RX FLUDARABINE 50MG/2ML SOL NDC # -- 00703-4852-11 | 264.54 | EA | 529.08 |
| 1 | 1 | 0 | 23961 | RX HERCEPTIN 440MG MDV 20ML NDC # -- 53242-0134-60 | 2255.63 | EA | 2255.63 |
| 1 | 1 | 0 | 21610 | RX NEULASTA 6MG/0.6ML SYR NDC # -- 55513-0190-01 | 2106.03 | EA | 2106.03 |
| 1 | 1 | 0 | 10510 | RX PROCIT 10M UN/ML VL 6X1ML NDC # -- 59676-0310-01 | 608.43 | pk | 608.43 |
| 1 | 1 | 0 | 11320 | RX PROCIT 20MUN/ML MDV 6X1ML NDC # -- 59676-0320-01 | 1216.86 | pk | 1216.86 |

Comments:

SUBTOTALS

14,728.80

TOTAL

0.00

AMOUNT DUE

14,728.80

* A Division of AmarisourceBergen Specialty Group

PLEASE RETURN THIS STUB WITH REMITTANCE, THANK YOU

1FN1ETG33;12

If postmarked by 02-08-2005 Pay \$ 14434.23
If postmarked by 03-10-2005 Pay \$ 14581.52
If postmarked by 04-09-2005 Pay \$ 14728.80
If postmarked after 04-09-2005 Pay \$ 14876.08
Terms : 2% 15, 1% 45, Net 75 Days

There will be an additional 1% charge per 30 days after the due date



Please indicate payment amount and
check number in the boxes provided

CHECK NUMBER

AMOUNT PAID

\$

Please
Remit
To:

ONCOLOGY SUPPLY
PO BOX 676554
DALLAS, TX 75287-6554

00003007513010847488000001472880000000040920055

2022-1866

INVOICE

INVOICE NO. 13010847488

01-24-2005

2 of 2

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

[illegible]

2022-1868-FEN1EO7BN000224

| ORDER # | DATE | ACCOUNT NUMBER | LOAN NUMBER | LOAN TYPE | SALES PERSON | INTEREST | CUSTOMER | TERMS |
|------------|------|----------------|-------------|-----------|--------------|----------|----------|---------------------------|
| 320616082 | | A 000030075 | C 000030075 | OSC | DOT086 | DOT020 | | |
| 01-24-2005 | | B 000030075 | D 000030075 | 030 | | | | 2% 15, 1% 45, Nbt 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | UNIT B/C | ITEM NUMBER | DOSE | DESCRIPTION | UNIT PRICE | UNIT TAX | EXTENDED PRICE |
|---------------------|---------------------|-------------|----------------|------|--|---------------|-------------|-------------------|
| 2 | 2 | 0 | 10982 | RX | PROCIT 40M UN/ML VI 4X1ML NDC # -- 50676-0340-01 | 1622 40 | pk TAX | 3244 96 0 00 |
| 9 | 9 | 0 | 11301 | RX | TAXOTERE 20MG/5ML SDV 0.5ML NDC # -- 00075-8001-20 | 282 22 | EA TAX | 2539 98 0 00 |
| | 1 | 0 | 11380 | RX | TAXOTERE 40MG/ML(80MG) SDV 2ML NDC # -- 00075-8001-80 | 1128 86 | EA TAX | 1128 06 0 00 |

WILLIAM

24,728 60

0 03

AMOUNT DUE

14,728.80

1987-1988



P.O. Box 2001
Dothan, AL 36302
888-877-8430 (Phone)
334-984-2448 (Fax)
FEIN: 33-0800482

2022-1065

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO 13010848927

01-25-2005

1 of 1

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1865-1FO1EUYCX000150

| ORDER DATE | ACCOUNT NUMBER | ORDER NUMBER | ORDER TYPE | SALES PERSON | DEPT | CUSTOMER P.O. # | TERMS |
|------------|----------------|--------------|------------|--------------|--------|-----------------|---------------------------|
| 320816082 | A 000030075 | C 000030075 | OSC | DOT096 | DOT020 | | |
| 01-24-2005 | B 000030075 | D 000030075 | 030 | | | | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | STY B/C | ITEM NUMBER | CLASS | DESCRIPTION | UNIT PRICE | U/M | EXTENDED PRICE |
|------------------|------------------|---------|-------------|-------|---|------------|-----|----------------|
| 1 | 1 | 0 | 11327 | RX | SOD CHL 0.9% EXCEL SOL 24X750ML NDC # -- 00264-7800-20 | 15.23 | CS | 15.23 |
| 2 | 2 | 0 | 16984 | MS | TERUMO HYPOD 16GX1 5NDL 100/BX Prod Code-- NN183BR | 4.04 | BX | 8.08 |
| 1 | 1 | 0 | 18601 | MS | VENOSET LS VENT 78" WY 48/CS NDC # -- 00741-1545-58 | 61.06 | CS | 61.06 |

Comments:

* A Division of AmerisourceBergen Specialty Group

PLEASE RETURN THIS STUB WITH REMITTANCE, THANK YOU

If postmarked by 02-09-2005 Pay \$ 102.29
If postmarked by 03-11-2005 Pay \$ 103.33
If postmarked by 04-10-2005 Pay \$ 104.37
If postmarked after 04-10-2005 Pay \$ 105.41
Terms : 2% 15, 1% 45, Net 75 Days

There will be an additional 1% charge per 30 days after the due date

| | |
|-------------------|--------|
| SUBTOTAL | 104.37 |
| TOTAL | 0.00 |
| AMOUNT DUE | 104.37 |

1FO1EUYCX000150

1FO1EUYCX000150

| | |
|------------------------|-------------|
| CUSTOMER NUMBER | 000030075 |
| INVOICE NUMBER | 13010848927 |
| INVOICE DATE | 01-25-2005 |
| AMOUNT DUE | \$ 104.37 |
| DUPLICATE | 04-10-2005 |



Please indicate payment amount and
check number in the boxes provided

| | |
|--------------|----|
| CHECK NUMBER | |
| AMOUNT PAID | \$ |

Please
Remit
To:

ONCOLOGY SUPPLY
PO BOX 676554
DALLAS, TX 75267-6554

000030075130108489270000000104370000000041020056



P O Box 2001
Dothan, AL 36302
888-877-8430 (Phone)
334-884-2448 (Fax)
FEIN: 33-0800482

2022-1866

ADDRESS SERVICE REQUESTED

INVOICE

INVOICE NO. 13010854314

01-31-2005

1 of 1

ALPHA

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

Ship To:

HICKES, DR ROBERT
1301 TRUMANSBURG RD, STE Q
ITHACA, NY 14850-1397

2022-1866-1FV008AT6000144

| ORDER DATE | ACCOUNT NUMBER | CUSTOMER | SALES PERSON | DEPT | CUSTOMER PAY TERMS |
|------------|----------------|-------------|--------------|--------|---------------------------|
| 320620292 | A 000030075 | C 000030075 | OSC | DOT077 | DOT020 |
| 01-31-2005 | B 000030075 | D 000030075 | 030 | | 2% 15, 1% 45, Net 75 Days |

| QUANTITY ORDERED | QUANTITY SHIPPED | ACTY A/B/C | ITEM NUMBER | CLASS | DESCRIPTION | UNIT PRICE | QTY | EXTENDED PRICE |
|------------------|------------------|------------|-------------|-------|---|------------|-----|----------------|
| 2 | 2 | 0 | 21618 | RX | NECLASTA 6MG/0.6ML SYR NDC # -- 55513-0190-01 | 2180 03 | EA | 4776 06 |
| 2 | 2 | 0 | 25473 | RX | PACITAXEL IN J 100MG MDV NDC # -- 55380-014-20 | 50 23 | EA | 100 46 |
| 6 | 6 | 0 | 11381 | RX | TAXOTERE 20MG/5ML SDV 0.5ML NDC # -- 00075-8001-20 | 282 22 | EA | 1693 32 |
| | 3 | 0 | 23328 | RX | ZOMETA INJ 4MG/5ML VIAL NDC # -- 00078-0387-25 | 777 23 | EA | 2331 69 |

Comments:

| | |
|-------------------|-----------------|
| SUBTOTAL | 8,901.53 |
| TAXES | 0.00 |
| AMOUNT DUE | 8,901.53 |

* A Division of AmerisourceBergen Specialty Group

PLEASE RETURN THIS STUB WITH REMITTANCE, THANK YOU

1FV00A8ME:11

If postmarked by 02-15-2005 Pay \$ 8723.50
If postmarked by 03-17-2005 Pay \$ 8812.52
If postmarked by 04-16-2005 Pay \$ 8901.53
If postmarked after 04-16-2005 Pay \$ 8990.54
Terms : 2% 15, 1% 45, Net 75 Days

There will be an additional 1% charge per 30 days after the due date

| | |
|-----------------|-------------|
| CUSTOMER NUMBER | 000030075 |
| INVOICE NUMBER | 13010854314 |
| INVOICE DATE | 01-31-2005 |
| AMOUNT DUE | \$ 8,901.53 |
| DUE DATE | 04-16-2005 |



Please indicate payment amount and
check number in the boxes provided

| | |
|--------------|----|
| CHECK NUMBER | |
| AMOUNT PAID | \$ |

Please
Remit
To:

ONCOLOGY SUPPLY
PO BOX 876554
DALLAS, TX 75287-6554

00003007513010854314000000890153000000041620056

EXHIBIT "B"

Dr. Robert Hickey

Invoice History Report for Accounts: 30075

Invoices for the period of 01/2005 through 10/2005

| Account # | Invoice # | Purchase Order # | Invoice Date | Invoice Due Date | Paid Date | Gross Invoice | Total Tax | Balance |
|-----------|--------------|------------------|--------------|------------------|-----------|---------------|---------------------------|--------------|
| 30075 | 130-10827692 | | 1/4/2005 | 3/20/2005 | | \$11,560.01 | \$0.00 | \$11,560.01 |
| 30075 | 130-10833374 | | 1/10/2005 | 3/26/2005 | | \$9,305.87 | \$0.00 | \$9,305.87 |
| 30075 | 130-10841697 | | 1/18/2005 | 4/3/2005 | | \$14,407.70 | \$0.00 | \$14,407.70 |
| 30075 | 130-10847488 | | 1/24/2005 | 4/9/2005 | | \$14,728.80 | \$0.00 | \$14,728.80 |
| 30075 | 130-10848927 | | 1/25/2005 | 4/10/2005 | | \$104.37 | \$0.00 | \$104.37 |
| 30075 | 130-10854314 | | 1/31/2005 | 4/16/2005 | | \$8,901.53 | \$0.00 | \$8,901.53 |
| | | | | | | | Total | \$58,998.28 |
| | | | | | | | Total Outstanding Balance | \$177,253.77 |